

Work Order ID 61737

Tuesday, August 31, 2010 3:22:51 PM



Page 1

Item ID: D212-664-101

Accept



Setup Start



Revision ID:

Stop



Item Name: Crosstube Fwd

Start Date: 8/31/2010 Start Qty: 1.00



Cust Item ID:

Required Date: 9/13/2010 Req'd Qty: 1.00

Customer:

Reference:

Approvals: Process Plan: *H*

Date: *10-8-31*

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D212-664-141	Rev D								

100

0.00



DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels as per PPP D212-664-101 CHG003

8,100/16

H for BG 10-9-16

110

0.00



Pick Kit

Packaging

Memo

0.00

Packaging

Packaging

(IX) MB 10-09-08

120

0.00



BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

Bend tube as per Dwg D212-664-141 using CNC bender program 212-fw and Folio D212-664-101

(IX) MB 10-09-08

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

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DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
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NOTE: Date & initial all entries

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Customer:

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QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start
Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

130	QC15- Crosstube Dimensional Check	0.00							
-----	-----------------------------------	------	--	--	--	--	--	--	--



QC	Memo	0.00				Ⓟ			
----	------	------	--	--	--	---	--	--	--

140	Crosstubes	0.00							
-----	------------	------	--	--	--	--	--	--	--



Crosstubes	Memo	0.00							
------------	------	------	--	--	--	--	--	--	--

Crosstubes

1-Drill pilot holes in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549, using drill table DT8577, set-up towers in hole #7 as per QSI 10

2-Ream hole to finish size in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.

3-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-141

4-Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D212-664-141

8/10/09/108

MP/SAD
10-09-08SAD
10-09-09

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Run Start



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

150



HandFXtube

Crosstubes Chemical Conversion

0.00

Memo

0.00

Hand Finishing Crosstubes

Chemical Conversion Coat within 24 hours of bending and drilling



MB 10-09-09

160



QC

QC5- Inspect part completeness to step on W/O

0.00

Memo

0.00

Quality Control

8/10/09/13



170



Outsource2

Outsource process - NDT per QSI038 4.1

0.00

Memo

0.00

Outsource process - NDT

Liquid Penetrant Inspection as per QSI 038
Issue P/O: 12557
LPI as per ASTM 1417 Level 2
Attach copy of NDT results to work order

CY 10/9/14 ①

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Run Start

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

180

Receive & Inspect for Damage & Mat'l Certs
Packaging

0.00



Packaging

Memo

0.00

Packaging

Ensure copy of NDT results attached to work order.

Perkins

190

QC5- Inspect part completeness to step on W/O

0.00



QC

Memo

0.00

Quality Control

Inspect for damage & ensure results are as per Dwg D212-664-141

ml 10 09 14

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Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

200



SprayPaint

Spray Painting

Spray Painting per QSI005 4.2
SprayPaint

0.00

Memo

0.00

1-Prime inside and outside crosstube as per QSI 005 4.2
2-Paint outside crosstube with White Imron as per QSI 005 4.2

PRIME:

Start Time: 11:00
Finish Time: 12:00

PAINT:

Start Time: 3:30
Finish Time: 4:30

ET 10.09.19

210



QC

Quality Control

QC14- Inspect Spray Paint

0.00

Memo

0.00

Then, Wrap in plastic bag to protect from scratches

ML 10 09 15 (2)

W/O:		WORK ORDER CHANGES					
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Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220		0.00							
	Crosstubes								
Crosstubes	Memo	0.00							
Crosstubes	1- Lightly scuff the bonded area using a 320 grit sand paper and clean the area with 41058 wash 'n' wipe 2-Install supports with magnobond as per OSI 015. Adhere for for 12 Hrs A/R 6398 Magnobond Batch: 114458 exp 01/2011 Torque: M 10.09' 16 ①								
230	QC5- Inspect part completeness to step on W/O	0.00							
QC	Memo	0.00							
Quality Control									
240	Pick Kit	0.00							
Packaging	Memo	0.00							
Packaging									

M 10 09 15 ①

8/30/16

①

P 00/1/16 ①

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

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Cust Item ID:

Required Date: 9/13/2010 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start



QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
250	QC4- 100% Inspect kits for completeness	0.00							
QC	Memo	0.00							
Quality Control									
260	Packaging	0.00							
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D212-664-101								
270	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

10/09/16
mf 10-9-16

W/O:		WORK ORDER CHANGES					
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Picklist Print

Tuesday, August 31, 2010 3:22:56 PM

Page 1

Work Order ID: 61737



Parent Item: D212-664-101



Parent Item Name: Crosstube Fwd

Start Date: 8/31/2010

Required Date: 9/13/2010

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:E 04.02.16 Reformat KJ/DS
IPP Rev:F 06-03-29 Remove Coments on Pick List JLM
IPP Rev:G 07-04-30 As per Rev C JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D212-664-101TRN

Manufactured

No

110

Each

1.0000

1

1



Crosstube Turning Detail



661400 MD 10-08-08

Location

Loc Qty

Loc Code

LG

1

61158

1

D3595-063-450

Manufactured

No

230

Each

68.6590

4

4.210526



RUBBER CUSHION



MD 10-09-25

Location

Loc Qty

Loc Code

LG

68.65897368

53775

5.97897368

58161

3.56

59580

10.12

60983

49

W/O:		WORK ORDER CHANGES					
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Picklist Print

Tuesday, August 31, 2010 3:22:56 PM

Page 2

Work Order ID: 61737



Parent Item: D212-664-101



Parent Item Name: Crosstube Fwd

Start Date: 8/31/2010

Required Date: 9/13/2010

Start Qty: 1.00

Required Qty: 1.00

MS21920-25

Purchased

No

220

Each

95.0000

4

4



Clamp(per MIL-DTL-8783C)



MA 10.09.15

Location

Loc Qty

Loc Code

LG

55

113281

0

114759

5

114901

25

115278

25

ST451

40

113281

5

113282

18

113744

1

114141

16

D2893-1

Manufactured

No

220

Each

35.0000

2

2



2.75 Support



MA 10.09.15

Location

Loc Qty

Loc Code

LG

35

56354

16

59457

19

D3428-1

Manufactured

No

240

Each

7.0000

1

1



Placard



60484 ①

Location

Loc Qty

Loc Code

ST056

7

60484

7

60484

Tuesday, August 31, 2010 3:22:56 PM

Shop Packet Print

Page 2

W/O:		WORK ORDER CHANGES					
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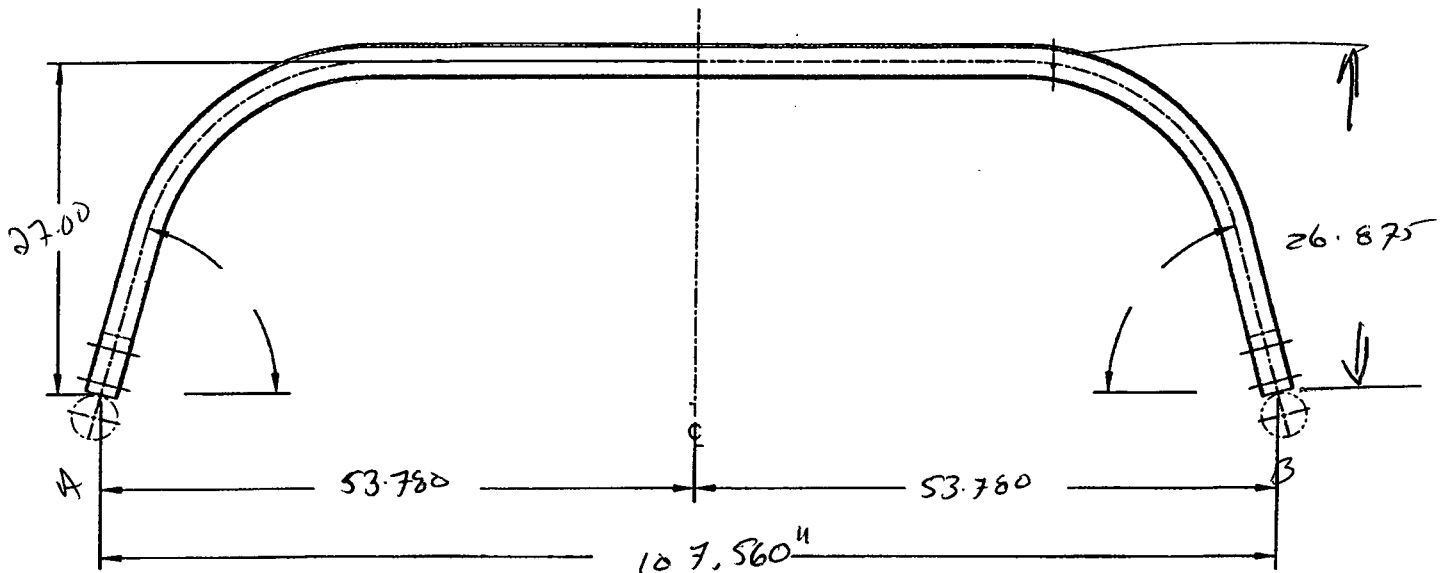
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DART AEROSPACE LTD	Work Order:	61737
Description: Crosstube High Fwd (205/212/412)	Part Number:	D212-664-101
Inspection Dwg: D212-664-141 Rev: D		Page 1 of 1

Required Dimension	Min	Max
Height	26.79	27.05
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.7



Comments

QC15 Inspection	S
Date	10/09/08

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	07.05.31	Dimensions updated per Dwg Rev C	KJ/JM	
C	10.04.01	Dwg Rev updated	KJ	

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Item	Qty -141	Qty -141B	Part Number	Description
1	X		D212-664-141	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD)
2		X	D212-664-141B	CROSSTUBE ASSEMBLY (214 HIGH FWD)
3	1	1	D6005-128	CROSSTUBE
4	2	2	D2893-1	SUPPORT
5	4	4	D3595-063-450	RUBBER CUSHION
6	4	4	MS21920-25	CLAMP (OR MS21920-26)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6005-128
FINISHED LENGTH = 126.514±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF
USING VIBRATING STYLUS
- 7) WEIGHT: D212-664-141 = 33.6 lbs (PER IIN-D212-664)
D212-664-141B = 33.6 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY. TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 3 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-25 CLAMPS (OR -26) WITH D3595-063-450 RUBBER CUSHIONS TO SECURE THE D2893-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 41737
PL 10-8-3

RELEASED
2009-10-29

D	REFORMAT/REVISE GENERAL NOTES/PART LIST: REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD -141B (ZN B4-2, D4-2); REMOVED REF & ADD TOLERANCES (ZN B4-3, C6-3, C8-3 & B6-3); RELOCATED FLAG #6 PER PAR 08-046 (ZN A5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4	RF	09.09.30
C	REMOVE -851 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	92	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-141	SHEET 1 OF 4
APPROVED	140	TITLE	SCALE
DE APPR.	#	XTUBE ASS'Y (205/212/412 HI FWD)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

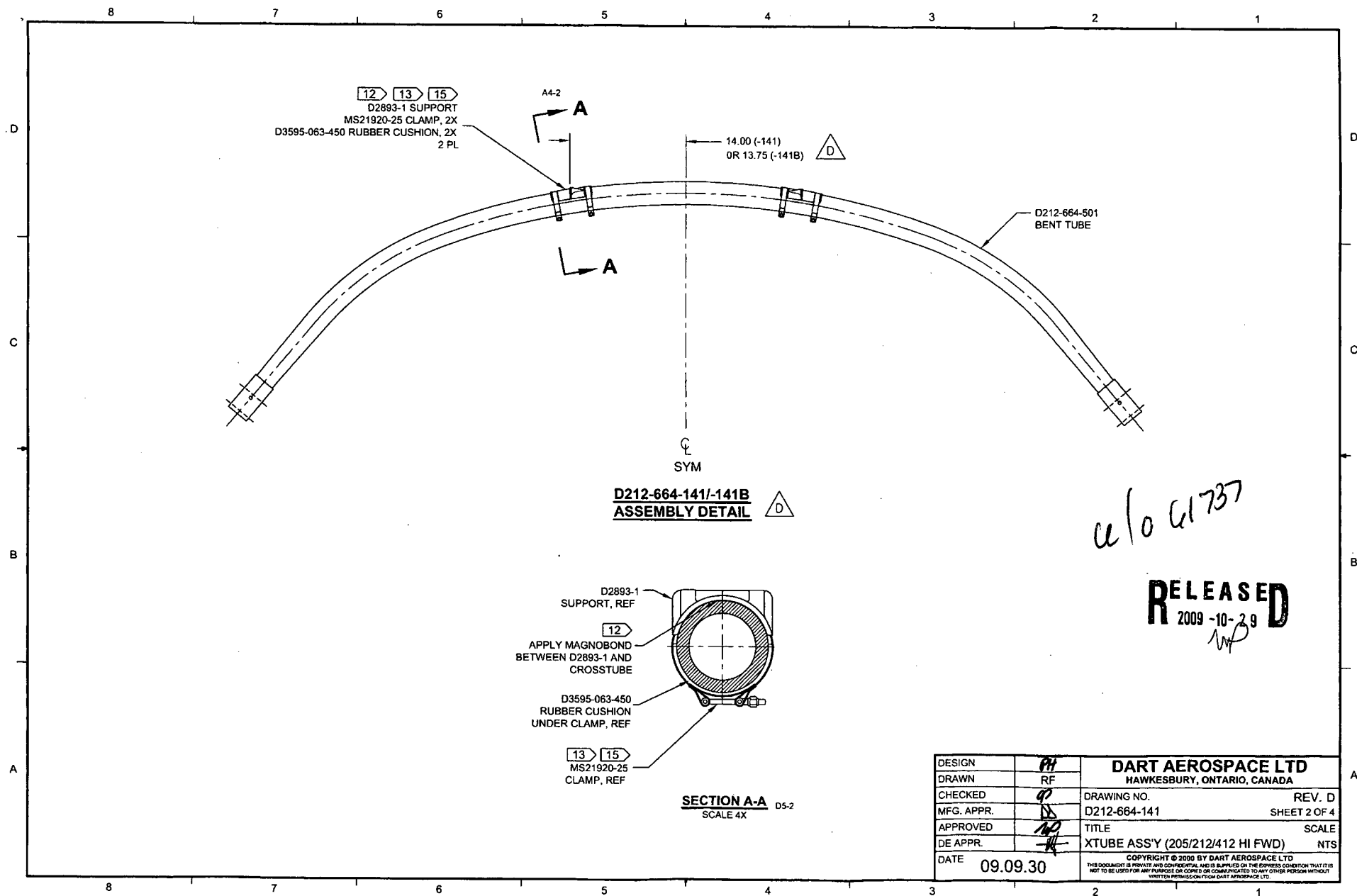
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DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	97	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-141	SHEET 2 OF 4
APPROVED	MP	TITLE	SCALE
DE APPR.	HL	XTUBE ASS'Y (205/212/412 HI FWD)	NTS
DATE	09.09.30	<small>COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

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DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

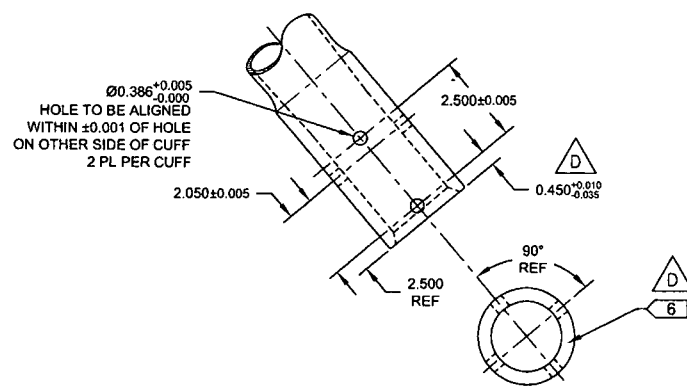
NOTE: Date & initial all entries

D212-664-501
BENDING AND DRILLING DETAIL

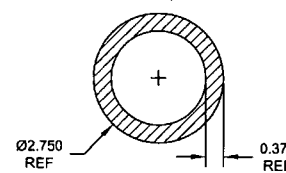


41737

RELEASED
2009-10-29
mf



VIEW C-C: CUFF DETAIL
SCALE 3X C2-3



SECTION B-B
SCALE 4X C4-3

DESIGN	<i>PH</i>	DART AEROSPACE LTD
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED	<i>Q</i>	DRAWING NO. REV. D
MFG. APPR.	<i>AS</i>	D212-664-141 SHEET 3 OF 4
APPROVED	<i>AD</i>	TITLE SCALE
DE APPR.	<i>MF</i>	XTUBE ASS'Y (205/212/412 HI FWD) NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS COVENANT THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.		

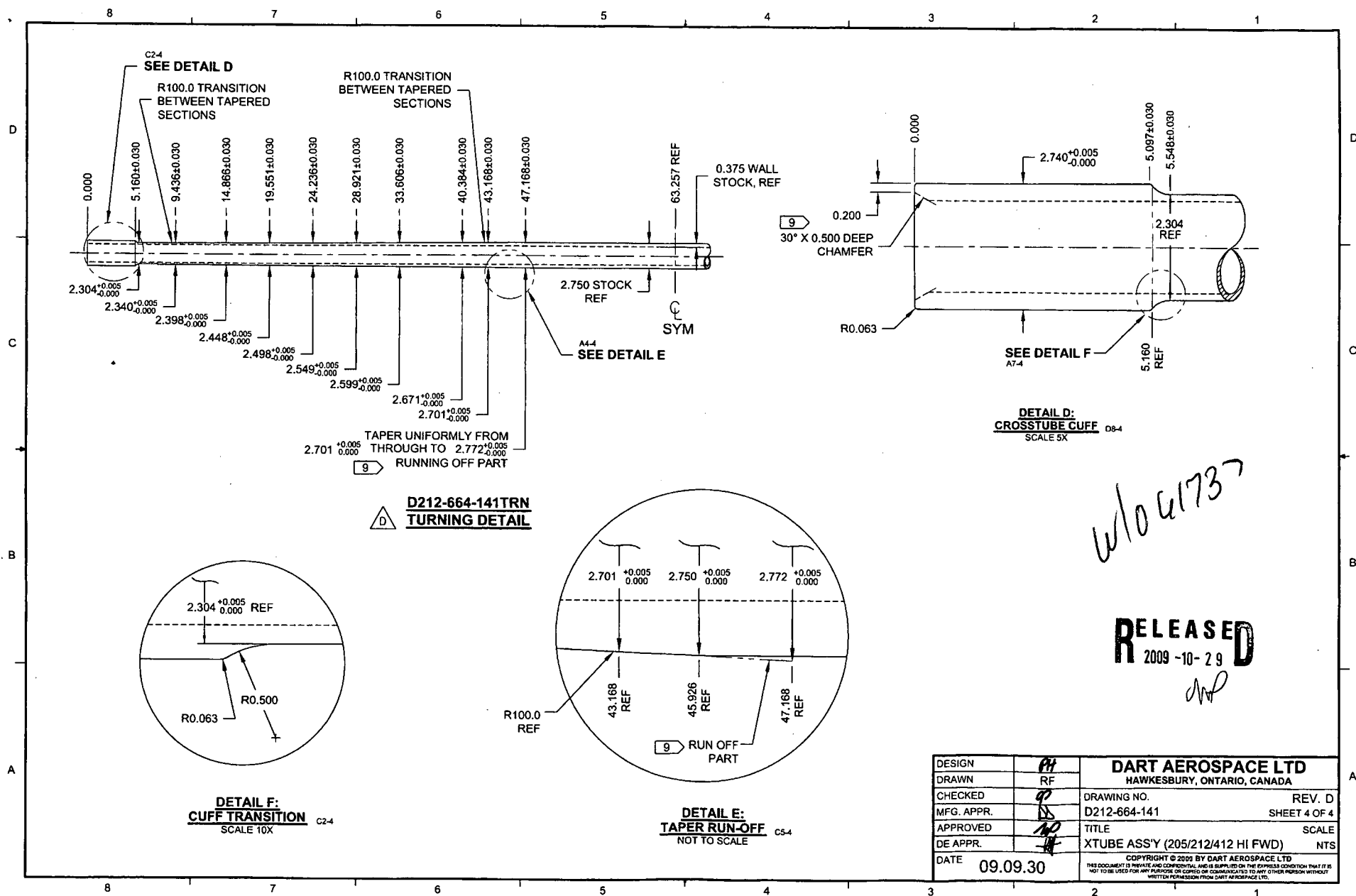
W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries



W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries



LIQUID PENETRANT TEST REPORT

P- 15190.

CLIENT
ATTENTION
ADDRESS
PROJECT
ITEM(S) EXAMINED

DART AEROSPACE
LINDA / CHANTEL
1270 ABELEEN
HAWKESBURY, ON.
K6H 1K7

DATE

SEPT 13 2010

PAGE

1 OF 1

TIME

AM ☒ PM ☐

ACUREN JOB NO.

100-10-0838

PO/WO NO.

12557

WORK LOCATION

HAWKESBURY PLANT

ACCEPTANCE STD.

ASTM 1417 REV./DATE 2007

F. P. I.

ON CROSS TUBES

2

JOB DESCRIPTION

PROCEDURE NO. LT0002 REV./DATE

TECHNIQUE NO. LT 1412 REV./DATE

PART NO.

SCOPE

WET FLUORESCENT LIQUID PENETRANT
INSPECTION CARRIED OUT 100%

TEST DETAILS

METHOD	<input checked="" type="checkbox"/> FLUORESCENT	<input type="checkbox"/> VISIBLE	<input checked="" type="checkbox"/> WATER WASH	<input type="checkbox"/> SOLVENT REMOVABLE	<input type="checkbox"/> POST EMULSIFIER
FAMILY BRAND	MAGNAFLUX		BLACK LIGHT S/N 18459	<input type="checkbox"/> OUTPUT > 1000 uW/cm ²	<input type="checkbox"/> AMBIENT < 2 fc
PENETRANT	2LG7	MINIMUM DWELL TIME 45 MIN.	LIGHTING EQUIP. <input type="checkbox"/> FLASHLIGHT <input type="checkbox"/> TROUBLELIGHT	<input type="checkbox"/> OUTPUT > 100 fc @ SURFACE	
PENETRANT REMOVER	H2O	MINIMUM DRY TIME 10 MIN.	OTHER LAB 120	LIGHT METER S/N 1098860	CAL DUE DATE OCT 19 2010
DEVELOPER	SD 52	MINIMUM DWELL TIME 10 MIN.			
DEVELOPER TYPE	<input checked="" type="checkbox"/> NON AQUEOUS	<input type="checkbox"/> AQUEOUS	<input type="checkbox"/> DRY		

TEST SURFACE

SURFACE CONDITION	<input type="checkbox"/> AS GROUND	<input type="checkbox"/> AS WELDED	<input checked="" type="checkbox"/> MACHINED	<input type="checkbox"/> SHOT BLASTED	<input checked="" type="checkbox"/> CLEAN BARE METAL
SURFACE TEMPERATURE	<input type="checkbox"/> < -4°C/ 20°F	<input type="checkbox"/> -4°C/ 20°F TO 10°C/50°F	<input checked="" type="checkbox"/> 10°C/50°F TO 52°C/125°F	<input type="checkbox"/> > 52°C/125°F	

RESULTS-

(☐ METRIC ☐ IMPERIAL)

1 cross tube - W.O. 61736 ✓

1 cross tube - W.O. 61737 ✓

10-09-14

Scope of Services

The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care

In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, express or implied, is made or intended by Acuren Group Inc.

SIGNATURES

CLIENT REPRESENTATIVE

Jan Tiffey

SIGNATURE

[Signature]

TECHNICIAN (SIGNATURE):

Nike Johnson

NAME (PRINT):

CGSB LEVEL 2 SNT LEVEL 6606

2ND TECHNICIAN

CGSB LEVEL SNT LEVEL

CGSB REG. NO.

DTR # E 63387

REPORT

REVIEWED BY:

NAME

INITIAL

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

PTS